



Dear Landlord,

The state of Ohio passed House Bill 5 effecting income tax collections on January 1, 2016. The City is complying with these requirements and updating its policies on reporting uniformly tenant information.

*Currently required by Codified Ordinance 178.25 entitled **Landlord Reporting and Tenant Registration** it shall be mandatory to submit a list to the City of Bedford Tax Department of the names, addresses, phone numbers and social security numbers or federal tax identification numbers of all persons, firms, corporations or other entitles occupying, leasing, renting, or otherwise using the premises within the City in such a manner as to produce economic benefit to the property owner, whether or not such benefit is called "rent" and whether or not such benefit results in a profit or loss. The required list shall be prepared as of December 31<sup>st</sup> of each year or when changes in tenants occur monthly, and submitted on or before the 31<sup>st</sup> of the following month.*

*Be advised of Codified Ordinance 178.99 **Violations; Penalty** section (D) **whoever violates any provision of this chapter for which violation no penalty is otherwise provided, is guilty of a misdemeanor of the first degree; punishable by up to six months in jail, a \$1000.00 fine and/or both.***

Attached is the Landlord Reporting Tenant Registration Form. Please fill out the form and submit it to the City of Bedford Tax Department promptly. For your convenience, an additional form regarding any change in tenants will be available on our city website at [www.bedfordoh.gov](http://www.bedfordoh.gov).

**All information is confidential and used for tax purposes only.**

Thank you for your cooperation.

The City of Bedford  
- Tax Department

## LANDLORD REPORTING TENANT REGISTRATION FORM

**A. Owner Information**

Full Name:

*Last**First**M.I.*

Business Name (if different from above):

FID/SSN: \_\_\_\_\_ Form filed: ☐ Schedule C ☐ Schedule E ☐ 1120S ☐ 1065 ☐ Other: \_\_\_\_\_

Mailing Address

*Street Address**Apartment/Unit #**City**State**ZIP Code*

Phone:

Type: ☐ Cell ☐ Home ☐ Office ☐ Alternate Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**B. Property Address(es) in Bedford***For additional space, you may use the back of form, or submit alternative documents*Rental Property: ☐ Yes ☐ No ☐ If no, Nature of Business: \_\_\_\_\_

If yes, continue to section C.

**C. Tenant(s) occupying property Eighteen (18) years of age or older**

Name/ Business Name	SSN/FID	Contact Number	Move in Date/ Date Operations Began
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*For additional space, you may use the back of form, or submit alternative documents*

**LANDLORD REPORTING  
TENANT UPDATE FORM****Owner Information**

Landlord Name: \_\_\_\_\_

*Last /Business Name**First**M.I.*

FID/SSN or City File Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

**Name of person (s) moving OUT (please include former address or current if available)***For additional space, you may use the back of form, or submit alternative documents***New Tenant(s) moving IN Eighteen (18) years of age or older**

Name/ Business Name	SSN/FID	Contact Number	Move in Date/ Date Operations Began
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*For additional space, you may use the back of form, or submit alternative documents*